B

## CLAIMS ONLY

| Application Number | Filing Date |
|---|---|
| 10/608824 | |
| Applicant(s) | |

* May be used for additional claims or amendments

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | * | | * | | * | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Indep | Depend | Indep | Depend | Indep | Depend | | Indep | Depend | Indep | Depend | Indep | Depend |
| ~~1~~ | | | | | | | 51 | | | | | | |
| ~~2~~ | | | | | | | 52 | | | | | | |
| ~~3~~ | | | | | | | 53 | | | | | | |
| ~~4~~ | | | | | | | 54 | | | | | | |
| ~~5~~ | | | | | | | 55 | | | | | | |
| ~~6~~ | | | | | | | 56 | | | | | | |
| ~~7~~ | | | | | | | 57 | | | | | | |
| ~~8~~ | | | | | | | 58 | | | | | | |
| ~~9~~ | | | | | | | 59 | | | | | | |
| ~~10~~ | | | | | | | 60 | | | | | | |
| ~~11~~ | | | | | | | 61 | | | | | | |
| ~~12~~ | | | | | | | 62 | | | | | | |
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| ~~14~~ | | | | | | | 64 | | | | | | |
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| ~~16~~ | | | | | | | 66 | | | | | | |
| ~~17~~ | | | | | | | 67 | | | | | | |
| 18 | 1 | | | | | | 68 | | | | | | |
| 19 | | 1 | | | | | 69 | | | | | | |
| 20 | | | | | | | 70 | | | | | | |
| 21 | | 5 | | | | | 71 | | | | | | |
| 22 | | | | | | | 72 | | | | | | |
| 23 | | | | | | | 73 | | | | | | |
| 24 | | | | | | | 74 | | | | | | |
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| 26 | | | | | | | 76 | | | | | | |
| 27 | | | | | | | 77 | | | | | | |
| ~~28~~ | | | | | | | 78 | | | | | | |
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| 34 | | | | | | | 84 | | | | | | |
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| 36 | | | | | | | 86 | | | | | | |
| 37 | | | | | | | 87 | | | | | | |
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| 40 | | | | | | | 90 | | | | | | |
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| 42 | | | | | | | 92 | | | | | | |
| 43 | | | | | | | 93 | | | | | | |
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| 48 | | | | | | | 98 | | | | | | |
| 49 | | | | | | | 99 | | | | | | |
| 50 | | | | | | | 100 | | | | | | |
| Total Indep | 1 | | | | | | Total Indep | | | | | | |
| Total Depend | 9 | | | | | | Total Depend | | | | | | |
| Total Claims | 10 | | | | | | Total Claims | | | | | | |